

PARKWISE PROGRAM APPLICATION

0	ffice Use Only
Permit Numbers:	
ssue Date:	Neighborhood
VP Original Date:	Initials:

Apartment Permit Application

INSTRUCTIONS: Please complete the entire application with accurate information. Proof of residence is required, a picture ID and **signed** lease (by both tenant and landlord), and a utility bill (Electric, Gas, Water, or Cable) or Bank Statement. If you have any questions, please call the ParkWiseOffice at 791-5071.

First Name _____ Middle Initial ____ Last Name ____

Street Address		Apt #	
Tucson, AZ 857 P	hone #		
costs \$48.00 annually, incl available on street. Permit I VALID in front of other resid in these areas can result in	luding the transferal Visitor Permit. Holders are limited to parking on the a lences, businesses, apartment comple a citation being issued. There are N	There is a limit of one permit per unit. The pe There is no guarantee on the parking spa apartment property frontage only. Permits are N lexes or on the opposite side of the street. Parl No Refunds for the permit once purchased. If become Invalid. Using an Invalid permit will re	ices IOT king

PERMIT #1 Applicant: All vehicle information is is left blank.	required. A permit cannot be issued if any information
VEHICLE INFORMATION	PERMIT#
Name on Vehicle's Registration:	
License Plate:	State:
Year:Make:Model:	:Color:

Please make your check or money order payab	le to: CITY OF TUCSON
Total Amount Enclosed: \$	DO NOT MAIL CASH
I/We understand that the City of Tucson can che I/We meet the requirements of the Resident application is true and accurate.	neck any of the information on this application to insure tha tial Parking Permit Program. All the information on th
lease return this application with the correct fee in the Mail to: ParkWise- P.O. Box 27210-Tucson, Arizona	he return envelope provided as soon as possible. 85726-7210
APPLICANT SIGNATURE	DATE
T/FORMS/RENEWALAPPS	